# HIV/AIDS in Peru and USAID Involvement

The HIV/AIDS epidemic in Peru is classified as "low level," and remains primarily concentrated among vulnerable populations. Prevalence is highest among men who have sex with men (MSM) and commercial sex workers (CSWs). The face of Peru's epidemic is largely young and male; men account for 83 percent of all reported AIDS cases, and 70 percent occur among those aged 20 to 39.

Despite these trends, it is important to note that HIV/AIDS incidence is gradually increasing among women and heterosexual men. In 1998, approximately 25 percent of people living with HIV/AIDS were female, and 55 percent of men living with the disease identified themselves as heterosexual (45 percent were homosexual or bisexual). In addition, there is increasing evidence of transmission from vulnerable groups to the general population. In 1999, 35 percent of young Peruvian men reported activity with female CSWs, and about 20 percent of HIV-positive MSM reported bisexual behavior. According to a Joint United Nations Programme on HIV/AIDS (UNAIDS)/National HIV/AIDS/STI Control Program report, by 2000:

- 71,200 adults were living with HIV/AIDS (general prevalence of 0.3 percent);
- Men accounted for 73.7 percent of adult infections;
- 4,500 children under the age of 15 were infected;
- 8900 children under 15 had lost their mother or both parents since the beginning of the epidemic; and
- 4600 people had died of AIDS through 1999.

The Ministry of Health (MOH) reported a cumulative 11,310 AIDS cases in Peru from the beginning of the epidemic through 2000. An estimated 95.5 percent of cumulative HIV/AIDS cases were transmitted sexually, and 2.9 percent of cases were transmitted from mother to child.

MOH data indicate that prevalence among vulnerable groups, where the epidemic is currently most concentrated, varies:

- Prevalence among MSM was 11.3 percent in 2000.
- Prevalence among female CSWs in Lima was 1.26 percent in 2000.



MOH data also show an increase in incidence among women; current national prevalence levels among pregnant women range from 0.3 to 0.5 percent.

#### NATIONAL RESPONSE

Established in 1995, the Programa de Control de Enfermedades de Transmisión Sexual y SIDA (PROCETSS) is the governmental agency within the MOH responsible for HIV/AIDS and sexually transmitted infection (STI) prevention and care. In 1986, prior to the initiation of PROCETSS, the government instituted a multisectoral AIDS commission.

Peru's current HIV/AIDS programming goal is to limit further expansion of the epidemic by preventing new cases and transmission from high-risk groups to the general population. The country's HIV/AIDS strategy, as defined by Peru's Vice Minister of Health during his address before the United Nations General Assembly Special Session on AIDS in June 2001, is oriented toward:

- Reinforcing early diagnosis and treatment of STIs;
- Implementing behavior change interventions;
- Supplying free antiretroviral treatments for pregnant women and newborns to reduce vertical transmission and risk of infection through artificial lactation;

- Ensuring the safety of the blood supply and promotion of proper biosafety practices;
- Offering quality services for people living with HIV/AIDS; and
- Promoting and protecting the human rights of persons affected by the epidemic.

Since the late 1990s, PROCETSS has implemented an STI/HIV prevention program heralded as a model for the Andean region. Peru was among the first three countries in Latin America (with Brazil and Bolivia) to adopt syndromic management of STIs and to begin zidovudine prophylaxis (in 1996) to prevent perinatal transmission. In addition, PROCETTS leadership was instrumental in working with the Peruvian Congress to pass Reglamento de Ley No. 26626 in 1996, which addresses the human rights of persons living with HIV/AIDS in Peru.

According to the Iniciativa Regional sobre SIDA para America Latina y el Caribe (SIDALAC), HIV/AIDS expenditures in Peru totaled US\$96.3 million in 2000, 21 percent of which came from public sources. In 2000, Peru's HIV/AIDS prevention program was cited by UNAIDS as one of the best in the world.

#### **USAID SUPPORT**

The **United States Agency for International Development (USAID)** is working to strengthen
Peru's National Epidemiological Surveillance

Key Population, Health, and Socioeconomic Indicators		
Population	25.7 million	World Bank 2000
Growth Rate	1.8	U.S. Census Bureau 2000*
Life Expectancy	Male: 68	U.S. Census Bureau 2000*
	Female: 73	
Total Fertility Rate	3.0	U.S. Census Bureau 2000*
Infant Mortality Rate	41 per 1,000 live births	U.S. Census Bureau 2000*
Maternal Mortality Ratio	280 per 100,000 live births	World Bank 1990
GNP per capita (US\$)	\$2,080	World Bank 2000
Public health expenditure as % GDP	2.4%	World Bank 1998
Adult Literacy (% of people 15 and above)	Male: 94.9%	UNESCO 2001
	Female: 85.9%	

<sup>\*</sup> From U.S. Census Bureau 2000 HIV/AIDS country profiles, which included data from U.S. Census Bureau, Population Reference Bureau, UNAIDS and WHO.

System, which tracks STIs and HIV/AIDS, particularly within high-risk groups. Mission activities also include strengthening laboratory diagnostic capacity, supporting the study of the relationship between tuberculosis and HIV/AIDS; disseminating information, education, and communication materials; and training peer health educators. In FY 2001, USAID allocated \$748,000 to HIV/AIDS prevention activities in Peru.

USAID also works closely with PROCETSS to curb transmission of STIs, reduce mother-to-child transmission, ensure safety of the blood supply, provide care and support to those affected by HIV/AIDS, and strengthen intersectoral coordination for HIV/AIDS.

### OTHER U.S. SUPPORT

The Centers for Disease Control and Prevention (CDC), and the Naval Medical Research Institute Detachment (NAMRID) collaborate with Peru's MOH to implement the Addressing Threats of Emerging and Re-emerging Infectious Diseases (VIGIA) project. The purpose of the project is to strengthen local capacity to effectively identify, control, and prevent emerging and re-emerging infectious diseases, including HIV/AIDS and STIs. Project components include: surveillance; applied research; prevention and control; and laboratory strengthening.

### **CHALLENGES**

According to Peru's Vice Minister of Health, the country faces several challenges to its HIV prevention and care efforts:

- Addressing a swift increase in HIV transmission among women indicating that HIV/AIDS may move from vulnerable groups to the general population;
- Addressing the lack of women's ability to negotiate sex;
- Reducing the high cost of antiretroviral medicines;

- Ensuring the human rights of those living with the disease; and
- Mitigating the impact of HIV/AIDS on social and economic development.

## SELECTED LINKS AND CONTACTS

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- 3. UNAIDS Country Office (Bolivia, Ecuador, Peru): Adriana Gómez-Sagüéz, InterCountry Program Adviser, c/o PNUD, Ave Beravides 786, Lima, Perú. Tel: (51-1) 447-0054, Fax: (51-1) 242-7860, E-mail: <a href="mailto:onusida@pnudpe.org.pe">onusida@pnudpe.org.pe</a>.

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